

U.S. Department of Justice
United States Marshals Service

Case 2:14-cv-03873-GJP Document 6 Filed 10/22/14 Page 1 of 2

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF	Troy Moore, Sr. Walden, Corrections Officer	COURT CASE NUMBER	14-3873
DEFENDANT	Walden, Corrections Officer	TYPE OF PROCESS	Lawsuit

SERVE ➔ AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
	Walden, Corrections Officer, Industrial Correctional Center
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
	8301 State Road Philadelphia, Pa 19136

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:		Number of process to be served with this Form - 285	n/a
Office of the Clerk United States District COURT n/a- Room 2609 601 Market Street Philadelphia, Pa 19106		Number of parties to be served in this case	1
		Check for service on U.S.A.	yes


SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):
Fold

n/a

FILED

OCT 22 2014

MICHAEL E. KUNZ, Clerk
By _____ Dep. Clerk

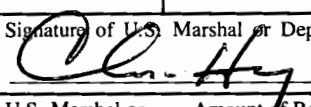
Signature of Attorney or other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE
		n/a	7-15-14

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk	Date
	1	No. 66	No. 66	Marie Ford	

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☒ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.		
Address (complete only if different than shown above)			
	Date of Service	Time	am
			pm
		Signature of U.S. Marshal or Deputy	
			

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund

REMARKS: 10.08.14: This person is unknown to the City.

U.S. Department of Justice
United States Marshals Service

Case 2:14-cv-03873-GJP Document 6 Filed 10/22/14 Page 2 of 2

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF Troy Moore, Sr.		COURT CASE NUMBER 14-3873
DEFENDANT Major Martin		TYPE OF PROCESS Lawsuit
SERVE ➔ AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Major Martin, Industrial Correctional Center	
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 8301 State Road Philadelphia, Pa 19136	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:		
Office of the Clerk United States District Court Room 2609 601 Market Street Philadelphia, Pa 19106		Number of process to be served with this Form - 285 n/a
		Number of parties to be served in this case 1
		Check for service on U.S.A. yes

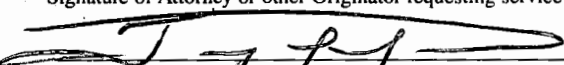
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE. (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):
Fold

n/a
n/a

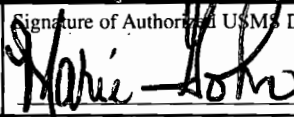
FILED

OCT 22 2014

MICHAEL E. KUNZ, Clerk
By _____ Dep. Clerk

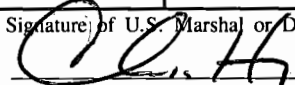
Signature of Attorney or other Originator requesting service on behalf of: 	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER n/a	DATE 7-15-14
--	---	-------------------------	-----------------

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 66	District to Serve No. 66	Signature of Authorized USM Deputy or Clerk 	Date
---	--------------------	------------------------------	-----------------------------	---	------

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☒ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
Address (complete only if different than shown above)	Date of Service Time am pm
Signature of U.S. Marshal or Deputy 	

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
-------------	---	----------------	---------------	------------------	--------------------------------	------------------

REMARKS:
10.08.14: City Requests more Identifiers